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## **FAX COVER SHEET**

OCT 0 6 2004

FAX NUMBER 17038729306						
FROM	Thomas M. Isaacson					
DATE	2004-10-06 21:05:56 GMT					
RE	Application No. 09/675,406					

## **COVER MESSAGE**

Attorney Docket No.: PALM 3506

Dear Sirs:

Please find attached the following associated with a response in the above-referenced case:

- (1) Transmittal
- (2) Fee Transmittal (2 copies)
- (3) Petition for Extension of Time
- (4) Power of Attorney/Change of Correspondence Address
- (5) Response/Amendment

Respectfully submitted,

Tom Isaacson
Berry & Associates, P.C.
9255 Sunset Blvd. Suite 810
Los Angeles, CA 90069
Direct: (410) 414-3056
Office: (310) 247-2860

Under the Pacetwork Reduction Act of 1895  TRANSMITTAL FORM  (to be used for all correspondence after Initial In	Application Number  Filing Date  First Named Inventor  Art Unit  Examiner Name	PTO/SB/21 (06- Approved for use through 08/30/2003, OMB 0651-00 trand Trademark Office; U.S. DEPARTMENT OF COMMER n of information unless it displays a valid OMB control numb 09/675,406.  September 29, 2000  Benoit Vielle 2173								
Total Number of Pages in This Submission	Altomey Docket Number	Paim-3506								
ENCLOSURES (Check all that apply)										
Fee Transmittal Form  Fee Attached  Amendment/Reply  After Final  Aftidavits/declaration(s)  Extension of Time Request  Express Abandonment Request  Information Disclosure Statement  Certified Copy of Priority Document(s)  Response to Missing Parts/ Incomplete Application  Response to Missing Parts  under 37 CFR 1.52 or 1.53	Drawing(s)  Licensing related Papers  Petition  Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Add  Terminal Disclaimer  Request for Refund  CD, Number of CD(s)	After Allowance communication to Technology Center (TC)  Appeal Communication to Board of Appeals and Interferences  Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  Proprietary Information  Status Letter  Other Enclosure(s) (please Identify below):								
	URE OF APPLICANT, ATTORN	EY, OR AGENT								
Firm Thomas M. Isaacson, Regindlyidual name  Signature  Date  October 6, 2004	No. 44166									
CE	RTIFICATE OF TRANSMISSION	I/MAILING								
I hereby certify that this correspondence is bei	no facsimile transmitted to the LISPTO or	deposited with the United States Postal Service with lents, P.O. Box 1450, Alexandria, VA 22313-1450 on								
Typed or printed name Thomas M Isaacso	)									
Signature Outro	Man	Date October 6, 2004								

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to fire (and by the USPTO to process) an application. Confidentiality is governed by 35-U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Criter information Office; U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA. 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA. 22313-1450.

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Signature

PTO/S8/17 (10-03) Approved for use through 07/31/2006: CMB 0651-0032 U.S. Petent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Repervork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Complete If Known FEE TRANSMITTAL 09/675.406 Application Number Filing Date September 29, 2000 for FY 2004 Benoît Vialle First Named Inventor Effective 10/01/2003, Patent fees are subject to ennual revision. Examiner Name Xiomara L. Bautista Applicant claims small entity status. See 37 CFR 1.27 Art Unit. 2173 TOTAL AMOUNT OF PAYMENT (3) 420.00 Palm-3506 Attorney Docket No. METHOD OF PAYMENT (check all that apply). FEE CALCULATION (continued) 3. ADDITIONAL FEES Check Large Entity | Small Entity Deposit Account: Fee Fee Description Decosit : Code (\$1 Code Fee Paid 503102 1051 130 2051 65 Surcharge - late filing fee or oath Number Deposit. Account 1052 50 2052 Surcharge - late provisional filing fee or Berry & Associates cover sheet Name 130 Non-English specification 1053 130 1053 The Director is authorized to: (check all that apply) 1812 2.520 1812 2,520 For filing a request for ex parte reexamination Charge fee(s) indicated below Credit any overpayments 1804 920\* Requesting publication of SIR prior to 920 1804.. Charge any additional fee(s) or any underpayment of fee(s) Examiner action Charge fee(s) indicated below, except for the filing fee 1805 1,840 1805 1,840\* Requesting publication of SIR after to the above-identified deposit account. Examiner action 1251 110 2251 .55 Extension for reply within first month **FEE CALCULATION** <del>120.00</del> 1252 420 2252 210 Extension for reply within second month 1. BASIC FILING FEE 1253 950 2253 475 Extension for reply within third month ergo Entity Small Entity Fee Fee Code (\$) Fee Description Fee Paid 1254 1:480 2254 740 Extension for reply within fourth month-1255 2,010 2255 1,005 Extension for reply within fifth month 1001 770 2001 385 Utility filing fee 1401 330 2401 1002 340 2002 170 Design filing fee 165 Notice of Appeal 1402 330 165. Filing a brief in support of an appeal. 2402 1003 530 2003 265 Plant filing fee 1403 290 2403 146 Request for gral hearing 1004, 770 2004 385 Reissue filing fee 1451 1.510 2005 RO Provisional filing fee 1451 1,510 Patition to institute a public use proceeding 1005 160 1452 110 2452 .55 Petition to revive - unavoidable SUBTOTAL (1) (\$) 1453 1 330 2453 665 Petition to revive - unintentional 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE 1501 1:330 665. Utility issue fee (or reissue). 2501 240 Design Issue fee Extra Claims 1502 480 2502 **Total Claims** 1503 640 2503 320 Plant Issue fee independent 1460 130 1460 130 Petitions to the Commissioner Claims Multiple Dependent 1807 50 1807 50. Processing fee under 37 CFR 1.17(q) Large Entity | Small Entity 1806 180 1806 180 Submission of Information Disclosure Stmt Fee Description Fee Fee Code (\$) 40 Recording each patent assignment per Code (\$) 8021 40 **BD21** property (times number of properties) Claims in excess of 20 1202 18 2202 385 Filing a submission after final rejection (37 CFR 1.129(a)) 1809 770 :2809 independent claims in excess of 3 1201 88 2201 43 1203 290 2203 145 Multiple dependent claim, if not paid 1810 770 2810 385. For each additional invention to be examined (37 CFR 1.129(b)) \*\* Reisaue Independent claims 1204 B6 2204 43 over original patent 1801 770 2801 385 Request for Continued Examination (RCE) 900 Request for expedited examination of a design application \*\* Reissue claims in excess of 20. 1802 900 1802 1205 18 and over original patent Other fee (specify) SUBTOTAL (2) Reduced by Besic Filing Fee Paid SUBTOTAL (3) (\$) 420.00 \*\*or number previously paid, if greater; For Reissues, see above Complete (# epplicable SUBMITTED BY Thomas M. Isaacson Registration No.

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· (Altorney/Agent)

44166

Telephone 410-414-3056

October 5, 2004

Dale

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FEE TRANSMITTA	Application Number 09			09/675	9/675,406							
for FY 2004	Filing Date S		Septen	September 29, 2000								
Effective 10/01/2003. Patent fees are subject to ennual revision	<b>)</b> .	First Named Inventor. Benz			Benoît	oit Vialle						
	. <del>.</del>				Xioma	ara L. Bautista						
Applicant daims small entity status. See 37 CFR 1.27.		Art Unit: 2173			2173	3						
TOTAL AMOUNT OF PAYMENT (\$) 420.00		Attorney Docket No. Palm				1-3506						
METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)											
Check Credit card Money Other None	3. ADDITIONAL FEES											
Deposit Account:	Large Entity   Small Entity   Fee   Fee											
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1204: 66 2204 43 *Reissue Independent claims over original patent	1801	770	2801				mination (RCE).					
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**or number previously paid, if greater: For Reissues, see above	Red	uced by	Basio Fil	ing Fee Pa	sid S	UBTOTAL	(3) (\$) 420.0	o l				
SUBMITTED BY (Complete (If applicable))												
Name (Prin/Type) Thomas M. Isaacson		Registration No. 44156				Telephone: 410-414-3058						
Signature More M. Som						Date	October 5, 200	4				

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